

QUERY CONTROL FORM		RTIS USE ONLY	
Application No. <u>09/904899</u>	Prepared by <u>T. McGILL</u>	Tracking Number <u>5971534</u>	
Examiner-GAU <u>Cain - 1114</u>	Date <u>7/12/04</u>	Week Date <u>6/21/04</u>	
	No. of queries <u>1</u>	<u>T-H Reuse IFW</u>	

SPECIFICATION	MESSAGE
<ul style="list-style-type: none"> a. Page Missing b. Text Continuity c. Holes through Data d. Other Missing Text e. Illegible Text f. Duplicate Text g. Brief Description h. Sequence Listing i. Appendix j. Amendments k. Other 	<p><i>Claims are not Renumbered in final column of index of claims</i></p> <p><i>Please Advise</i></p>
<p>CLAIMS</p> <ul style="list-style-type: none"> a. Claim(s) Missing b. Improper Dependency c. Duplicate Numbers d. Incorrect Numbering e. <u>Index Disagrees</u> f. Punctuation g. Amendments h. Bracketing i. Missing Text j. Duplicate Text k. Other 	<p><i>Thank you</i></p> <p>initials <i>DM</i></p> <p>RESPONSE <i>Claims have been Renumbered.</i></p> <p>initials <i>EC</i></p>